

**FEC  
FORM 3****REPORT OF RECEIPTS  
AND DISBURSEMENTS**  
For An Authorized Committee

Office Use Only

1. NAME OF COMMITTEE (in full) TYPE OR PRINT ▼

Example: If typing, type over the lines.

12FE4M5

PAUL GOSAR FOR CONGRESS

ADDRESS (number and street)

PO Box 2967



Check if different than previously reported. (ACC)

Prescott

AZ

86302

2. FEC IDENTIFICATION NUMBER ▼

C

C00461806

CITY ▲

STATE ▲

ZIP CODE ▲

STATE ▼ DISTRICT

3. IS THIS REPORT



NEW (N)

OR



AMENDED (A)

AZ

04

4. TYPE OF REPORT (Choose One)

(a) Quarterly Reports:



April 15 Quarterly Report (Q1)



July 15 Quarterly Report (Q2)



October 15 Quarterly Report (Q3)



January 31 Year-End Report (YE)



Termination Report (TER)

(b) 12-Day PRE-Election Report for the:



Primary (12P)



General (12G)



Runoff (12R)



Convention (12C)



Special (12S)

Election on

M M / D D / Y Y Y Y

in the State of

(c) 30-Day POST-Election Report for the:



General (30G)



Runoff (30R)



Special (30S)

Election on

M M / D D / Y Y Y Y

in the State of

5. Covering Period

M M / D D / Y Y Y Y

01 / 01 / 2014

through

M M / D D / Y Y Y Y

03 / 31 / 2014

I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete.

Type or Print Name of Treasurer Dr. W. Brian Powley

Signature of Treasurer

Dr. W. Brian Powley

[Electronically Filed]

Date

M M / D D / Y Y Y Y

04 / 15 / 2014

NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 2 U.S.C. §437g.

Office  
Use  
Only**FEC FORM 3**  
(Revised 02/2003)

# SUMMARY PAGE

of Receipts and Disbursements

FEC Form 3 (Revised 02/2003)

PAGE 2 / 36

Write or Type Committee Name

**PAUL GOSAR FOR CONGRESS**

Report Covering the Period:

From:

M	M	/	D	D	/	Y	Y	Y	Y
0	1		0	1		2	0	1	4

To:

M	M	/	D	D	/	Y	Y	Y	Y
0	3		3	1		2	0	1	4

	COLUMN A This Period	COLUMN B Election Cycle-to-Date
6. Net Contributions (other than loans)		
(a) Total Contributions (other than loans) (from Line 11(e))....	41885.05	338628.03
(b) Total Contribution Refunds (from Line 20(d)) .....	55.00	555.00
(c) Net Contributions (other than loans) (subtract Line 6(b) from Line 6(a)) .....	41830.05	338073.03
7. Net Operating Expenditures		
(a) Total Operating Expenditures (from Line 17) .....	18184.16	161321.07
(b) Total Offsets to Operating Expenditures (from Line 14).....	0.00	15194.83
(c) Net Operating Expenditures (subtract Line 7(b) from Line 7(a)) .....	18184.16	146126.24
8. Cash on Hand at Close of Reporting Period (from Line 27).....	200311.54	
9. Debts and Obligations Owed <b>TO</b> the Committee (Itemize all on Schedule C and/or Schedule D) .....	0.00	
10. Debts and Obligations Owed <b>BY</b> the Committee (Itemize all on Schedule C and/or Schedule D) .....	11138.16	

**For further information contact:**

Federal Election Commission  
999 E Street, NW  
Washington, DC 20463

Toll Free 800-424-9530  
Local 202-694-1100

# **DETAILED SUMMARY PAGE** of Receipts

FEC Form 3 (Revised 12/2003)

PAGE 3 / 36

Write or Type Committee Name

**PAUL GOSAR FOR CONGRESS**

Report Covering the Period:

From:

M	M	/	D	D	/	Y	Y	Y	Y
0	1		0	1		2	0	1	4

To:

M	M	/	D	D	/	Y	Y	Y	Y
0	3		3	1		2	0	1	4

**I. RECEIPTS**
**COLUMN A**  
Total This Period

**COLUMN B**  
Election Cycle-to-Date
**11. CONTRIBUTIONS (other than loans) FROM:**

(a) Individuals/Persons Other Than Political Committees

(i) Itemized (use Schedule A).....

16750.00

186916.04

(ii) Unitemized.....

2635.05

24943.55

(iii) TOTAL of contributions from individuals ▶

19385.05

211859.59

(b) Political Party Committees.....

0.00

0.00

(c) Other Political Committees (such as PACs).....

22500.00

126768.44

(d) The Candidate.....

0.00

0.00

(e) TOTAL CONTRIBUTIONS (other than loans) (add Lines 11(a)(iii), (b), (c), and (d))..

41885.05

338628.03

**12. TRANSFERS FROM OTHER AUTHORIZED COMMITTEES .....**

0.00

148.81

**13. LOANS:**

(a) Made or Guaranteed by the Candidate.....

0.00

0.00

(b) All Other Loans.....

0.00

0.00

(c) TOTAL LOANS (add Lines 13(a) and (b)).....

0.00

0.00

**14. OFFSETS TO OPERATING EXPENDITURES (Refunds, Rebates, etc.) .....**

0.00

15194.83

**15. OTHER RECEIPTS (Dividends, Interest, etc.) .....**

0.00

2.80

**16. TOTAL RECEIPTS** (add Lines 11(e), 12, 13(c), 14, and 15) (Carry Total to Line 24, page 4)..... ▶

41885.05

353974.47

# **DETAILED SUMMARY PAGE** of Disbursements

FEC Form 3 (Revised 02/2003)

PAGE 4 / 36

II. DISBURSEMENTS	COLUMN A Total This Period	COLUMN B Election Cycle-to-Date
17. OPERATING EXPENDITURES.....	18184.16	161321.07
18. TRANSFERS TO OTHER AUTHORIZED COMMITTEES .....	0.00	0.00
19. LOAN REPAYMENTS:		
(a) Of Loans Made or Guaranteed by the Candidate.....	0.00	0.00
(b) Of All Other Loans .....	0.00	0.00
(c) TOTAL LOAN REPAYMENTS (add Lines 19(a) and (b)).....	0.00	0.00
20. REFUNDS OF CONTRIBUTIONS TO:		
(a) Individuals/Persons Other Than Political Committees .....	55.00	555.00
(b) Political Party Committees.....	0.00	0.00
(c) Other Political Committees (such as PACs) .....	0.00	0.00
(d) TOTAL CONTRIBUTION REFUNDS (add Lines 20(a), (b), and (c)).....	55.00	555.00
21. OTHER DISBURSEMENTS .....	4000.00	63900.00
22. <b>TOTAL DISBURSEMENTS</b> (add Lines 17, 18, 19(c), 20(d), and 21) ►	22239.16	225776.07

## **III. CASH SUMMARY**

23. CASH ON HAND AT BEGINNING OF REPORTING PERIOD.....	180665.65
24. TOTAL RECEIPTS THIS PERIOD (from Line 16, page 3).....	41885.05
25. SUBTOTAL (add Line 23 and Line 24).....	222550.70
26. TOTAL DISBURSEMENTS THIS PERIOD (from Line 22).....	22239.16
27. CASH ON HAND AT CLOSE OF REPORTING PERIOD (subtract Line 26 from Line 25).....	200311.54

# **SCHEDULE A (FEC Form 3)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:

PAGE 5 OF 36

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
12	13a	13b	14	

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

PAUL GOSAR FOR CONGRESS

Full Name (Last, First, Middle Initial)

Steve C. Barclay

Mailing Address 40 N Central Ave #1400

City

Phoenix

State

AZ

Zip Code

85004

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Barclay Legal

Occupation

Attorney

Receipt For: 2014

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

1000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
03		30		2014

Transaction ID : SA11AI.17861

Amount of Each Receipt this Period

500.00

Full Name (Last, First, Middle Initial)

Dr. Matthew J. Campbell Jr.

Mailing Address 1601 Elsdon Cir

City

Carmichael

State

CA

Zip Code

95608

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Campbell Dental

Occupation

Dentist

Receipt For: 2014

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

750.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
01		11		2014

Transaction ID : SA11AI.17802

Amount of Each Receipt this Period

250.00

Full Name (Last, First, Middle Initial)

John Carlson

Mailing Address 3575 McCormick Dr #2-203

City

Bullhead City

State

AZ

Zip Code

86429

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Mohave Electric Co-op

Occupation

CEO

Receipt For: 2014

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

2000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
01		22		2014

Transaction ID : SA11AI.17840

Amount of Each Receipt this Period

500.00

SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

1250.00

# **SCHEDULE A (FEC Form 3)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:

PAGE 6 OF 36

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
12	13a	13b	14	

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

PAUL GOSAR FOR CONGRESS

Full Name (Last, First, Middle Initial)

Kevin S Conroy

Mailing Address 9411 E Calle De Las Brisas

City

Scottsdale

State

AZ

Zip Code

85255

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Allen Endodontic GroupOccupation  
Administrator

Receipt For: 2014

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

750.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
03		10		2014

Transaction ID : SA11AI.17870

Amount of Each Receipt this Period

750.00

Full Name (Last, First, Middle Initial)

Dr. James R. Dumas Jr.

Mailing Address PO Box 700

City

Prentiss

State

MS

Zip Code

39474

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Dumas DentalOccupation  
Dentist

Receipt For: 2014

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
01		13		2014

Transaction ID : SA11AI.17803

Amount of Each Receipt this Period

250.00

Full Name (Last, First, Middle Initial)

Anthony Grande

Mailing Address 4017 Estes Rd.

City

Nashville

State

TN

Zip Code

37216

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
CCAOccupation  
Chief Development Officer

Receipt For: 2014

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

1000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
03		31		2014

Transaction ID : SA11AI.17872

Amount of Each Receipt this Period

1000.00

SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

2000.00

# **SCHEDULE A (FEC Form 3)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 7 OF 36

☒ 11a ☐ 11b ☐ 11c ☐ 11d  
12 13a 13b 14 15

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**PAUL GOSAR FOR CONGRESS**

Full Name (Last, First, Middle Initial)

**Douglas Hadnot**

**A.**

Mailing Address PO Box 278

City

Lolo

State

MT

Zip Code

59747

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Self

Occupation  
Dentist

Receipt For: 2014

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

600.00

Date of Receipt

M M / D D / Y Y Y Y  
01 / 11 / 2014

**Transaction ID : SA11AI.17804**

Amount of Each Receipt this Period

100.00

Full Name (Last, First, Middle Initial)

**Thomas Harrison**

**B.**

Mailing Address 21715 Kingsland Blvd.

City

Katy

State

TX

Zip Code

77450

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Harrison Dental

Occupation  
Dentist

Receipt For: 2014

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

500.00

Date of Receipt

M M / D D / Y Y Y Y  
01 / 11 / 2014

**Transaction ID : SA11AI.17831**

Amount of Each Receipt this Period

250.00

Full Name (Last, First, Middle Initial)

**Dr. Robert Hawke**

**C.**

Mailing Address 6745 E Tivani Dr.

City

Tucson

State

AZ

Zip Code

85715

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Robert F. Hawke, DDS

Occupation  
Dentist

Receipt For: 2014

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

3000.00

Date of Receipt

M M / D D / Y Y Y Y  
01 / 23 / 2014

**Transaction ID : SA11AI.17817**

Amount of Each Receipt this Period

200.00

**SUBTOTAL** of Receipts This Page (optional).....

**TOTAL** This Period (last page this line number only).....

550.00

# **SCHEDULE A (FEC Form 3)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 8 OF 36  
 (check only one)  
☒ 11a ☐ 11b ☐ 11c ☐ 11d  
 12 13a 13b 14 15

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)  
**PAUL GOSAR FOR CONGRESS**

Full Name (Last, First, Middle Initial) <b>Dr. Robert Hawke</b>			Date of Receipt M M / D D / Y Y Y Y 02 / 24 / 2014	
Mailing Address 6745 E Tivani Dr.			Transaction ID : SA11AI.17816	
City Tucson	State AZ	Zip Code 85715	Amount of Each Receipt this Period 200.00	
FEC ID number of contributing federal political committee. C				
Name of Employer Robert F. Hawke, DDS		Occupation Dentist		
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		Election Cycle-to-Date 3200.00		

Full Name (Last, First, Middle Initial) <b>Dr. Robert Hawke</b>			Date of Receipt M M / D D / Y Y Y Y 03 / 24 / 2014	
Mailing Address 6745 E Tivani Dr.			Transaction ID : SA11AI.17815	
City Tucson	State AZ	Zip Code 85715	Amount of Each Receipt this Period 200.00	
FEC ID number of contributing federal political committee. C				
Name of Employer Robert F. Hawke, DDS		Occupation Dentist		
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		Election Cycle-to-Date 3400.00		

Full Name (Last, First, Middle Initial) <b>Bruce Hutchison</b>			Date of Receipt M M / D D / Y Y Y Y 01 / 11 / 2014	
Mailing Address 15010 Starry Night Lane			Transaction ID : SA11AI.17865	
City Centreville	State VA	Zip Code 20120	Amount of Each Receipt this Period 500.00	
FEC ID number of contributing federal political committee. C				
Name of Employer Self		Occupation Dentist		
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		Election Cycle-to-Date 500.00		

<b>SUBTOTAL</b> of Receipts This Page (optional).....	900.00
<b>TOTAL</b> This Period (last page this line number only).....	



# **SCHEDULE A (FEC Form 3)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:

PAGE 9 OF 36

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
12	13a	13b	14	

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

PAUL GOSAR FOR CONGRESS

Full Name (Last, First, Middle Initial)

Michael Ingram

Mailing Address 6094 E Cholla Dr.

City

Paradise Valley

State

AZ

Zip Code

85253

FEC ID number of contributing  
federal political committee.

C

Name of Employer

El Dorado Holidngs Inc.

Occupation

Real Estate Investment

Receipt For: 2014

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

1000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
03		28		2014

Transaction ID : SA11AI.17808

Amount of Each Receipt this Period

1000.00

Full Name (Last, First, Middle Initial)

James Landers

Mailing Address 956 12th St

City

Cody

State

WY

Zip Code

82414

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Landers Dental

Occupation

Dentist

Receipt For: 2014

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

300.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
01		11		2014

Transaction ID : SA11AI.17832

Amount of Each Receipt this Period

300.00

Full Name (Last, First, Middle Initial)

James Lange

Mailing Address 7278 E Cozy Camp Dr.

City

Prescott

State

AZ

Zip Code

86305

FEC ID number of contributing  
federal political committee.

C

Name of Employer

N/A

Occupation

Retired

Receipt For: 2014

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
02		07		2014

Transaction ID : SA11AI.17880

Amount of Each Receipt this Period

250.00

SUBTOTAL of Receipts This Page (optional).....

1550.00

TOTAL This Period (last page this line number only).....

# **SCHEDULE A (FEC Form 3)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 10 OF 36  
 (check only one)  
☒ 11a ☐ 11b ☐ 11c ☐ 11d  
☐ 12 ☐ 13a ☐ 13b ☐ 14 ☐ 15

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)  
**PAUL GOSAR FOR CONGRESS**

Full Name (Last, First, Middle Initial) <b>A. James Lange</b>		Date of Receipt <div> <div>M M / D D / Y Y Y Y</div> <div>03 / 05 / 2014</div> </div>
Mailing Address 7278 E Cozy Camp Dr.		Transaction ID : SA11AI.17810
City Prescott	State AZ	
Zip Code 86305		
FEC ID number of contributing federal political committee. <div>C</div>		
Name of Employer N/A	Occupation Retired	Amount of Each Receipt this Period <div> <div></div> <div>200.00</div> </div>
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date <div> <div></div> <div>450.00</div> </div>	

Full Name (Last, First, Middle Initial) <b>B. Cheryl Lombard</b>		Date of Receipt <div> <div>M M / D D / Y Y Y Y</div> <div>03 / 10 / 2014</div> </div>
Mailing Address 1005 E Hearn Rd.		Transaction ID : SA11AI.17827
City Phoenix	State AZ	
Zip Code 85022		
FEC ID number of contributing federal political committee. <div>C</div>		
Name of Employer The Nature Conservancy	Occupation Government Relations Director	Amount of Each Receipt this Period <div> <div></div> <div>500.00</div> </div>
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date <div> <div></div> <div>500.00</div> </div>	

Full Name (Last, First, Middle Initial) <b>C. Ray Maddox</b>		Date of Receipt <div> <div>M M / D D / Y Y Y Y</div> <div>02 / 17 / 2014</div> </div>
Mailing Address 1200 N Walnut St.		Transaction ID : SA11AI.17881
City Hartford City	State IN	
Zip Code 47348		
FEC ID number of contributing federal political committee. <div>C</div>		
Name of Employer Maddox Dental	Occupation Dentist	Amount of Each Receipt this Period <div> <div></div> <div>100.00</div> </div>
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date <div> <div></div> <div>300.00</div> </div>	

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	<div> <div></div> <div>800.00</div> </div>
<b>TOTAL</b> This Period (last page this line number only) .....	<div> <div></div> </div>

# **SCHEDULE A (FEC Form 3)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:

PAGE 11 OF 36

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
12	13a	13b	14	

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

PAUL GOSAR FOR CONGRESS

Full Name (Last, First, Middle Initial)

A. Madjid Matin

Mailing Address 5532 Wisconsin Ave #1545

City

Chevy Chase

State

MD

Zip Code

20815

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
SelfOccupation  
Periodontist

Receipt For: 2014

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
01		22		2014

Transaction ID : SA11AI.17837

Amount of Each Receipt this Period

250.00

Full Name (Last, First, Middle Initial)

B. Dr. Bernard McDermott

Mailing Address 4208 Chesapeake St NW

City

Washington

State

DC

Zip Code

20016

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
RetiredOccupation  
Dentist

Receipt For: 2014

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
01		22		2014

Transaction ID : SA11AI.17826

Amount of Each Receipt this Period

250.00

Full Name (Last, First, Middle Initial)

C. Dr. Kenneth McDougall

Mailing Address 1605 9th Ave SE

City

Jamestown

State

ND

Zip Code

58401

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
McDougall DentalOccupation  
Dentist

Receipt For: 2014

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

1000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
01		11		2014

Transaction ID : SA11AI.17866

Amount of Each Receipt this Period

500.00

SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

1000.00

# **SCHEDULE A (FEC Form 3)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:

PAGE 12 OF 36

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
12	13a	13b	14	

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

PAUL GOSAR FOR CONGRESS

Full Name (Last, First, Middle Initial)

Charles McGinty

A.

Mailing Address 5059 McClelland Blvd

City

Joplin

State

MO

Zip Code

64804

FEC ID number of contributing  
federal political committee.

C

Name of Employer

McGinty Dental

Occupation

Dentist

Receipt For: 2014

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
01		13		2014

Transaction ID : SA11AI.17858

Amount of Each Receipt this Period

250.00

Full Name (Last, First, Middle Initial)

Steven S. Mehta

B.

Mailing Address 1340 S Jimson Loop

City

Show Low

State

AZ

Zip Code

85901

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Mehtaesthetics Vein and Laser

Occupation

Medical Director

Receipt For: 2014

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

1000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
03		31		2014

Transaction ID : SA11AI.17873

Amount of Each Receipt this Period

1000.00

Full Name (Last, First, Middle Initial)

Julian Moiseiwitsch

C.

Mailing Address 3040 Garrison St NW

City

Washington

State

DC

Zip Code

20008

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Self

Occupation

Endodontist

Receipt For: 2014

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
01		22		2014

Transaction ID : SA11AI.17857

Amount of Each Receipt this Period

250.00

SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

1500.00

# **SCHEDULE A (FEC Form 3)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:

PAGE 13 OF 36

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
12	13a	13b	14	

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

PAUL GOSAR FOR CONGRESS

Full Name (Last, First, Middle Initial)

A. Ron Ober

Mailing Address 10313 N 50th St.

City

Paradise Valley

State

AZ

Zip Code

85253

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Policy Development Group

Occupation

President &amp; CEO

Receipt For: 2014

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

2500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
03		09		2014

Transaction ID : SA11AI.17813

Amount of Each Receipt this Period

500.00

Full Name (Last, First, Middle Initial)

B. Pat Rabot

Mailing Address 11581 E Arabian Park Dr.

City

Scottsdale

State

AZ

Zip Code

85259

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Self

Occupation

Oral Surgeon

Receipt For: 2014

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

750.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
02		28		2014

Transaction ID : SA11AI.17822

Amount of Each Receipt this Period

750.00

Full Name (Last, First, Middle Initial)

C. Brent Rous

Mailing Address 400 Allison

City

Newton

State

KS

Zip Code

67114

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Rous Dental

Occupation

Dentist

Receipt For: 2014

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
01		11		2014

Transaction ID : SA11AI.17859

Amount of Each Receipt this Period

250.00

SUBTOTAL of Receipts This Page (optional).....

1500.00

TOTAL This Period (last page this line number only).....

# **SCHEDULE A (FEC Form 3)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 14 OF 36

☒ 11a ☐ 11b ☐ 11c ☐ 11d  
12 13a 13b 14 15

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**PAUL GOSAR FOR CONGRESS**

Full Name (Last, First, Middle Initial)

**Paula L. Russo DDS**

**A.**

Mailing Address 2021 K St NW #522

City

Washington

State

DC

Zip Code

20006

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Self

Occupation  
Dentist

Receipt For: 2014

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

1000.00

Date of Receipt

M M / D D / Y Y Y Y  
01 / 22 / 2014

**Transaction ID : SA11AI.17791**

Amount of Each Receipt this Period

1000.00

Full Name (Last, First, Middle Initial)

**Brian Scott**

**B.**

Mailing Address 511 Byron St.

City

Palo Alto

State

CA

Zip Code

94301

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Self

Occupation  
Dentist

Receipt For: 2014

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

1000.00

Date of Receipt

M M / D D / Y Y Y Y  
01 / 11 / 2014

**Transaction ID : SA11AI.17867**

Amount of Each Receipt this Period

500.00

Full Name (Last, First, Middle Initial)

**Janice Scott**

**C.**

Mailing Address 2648 St Helena Ct

City

Livermore

State

CA

Zip Code

94550

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Self

Occupation  
Dentist

Receipt For: 2014

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

1000.00

Date of Receipt

M M / D D / Y Y Y Y  
01 / 11 / 2014

**Transaction ID : SA11AI.17868**

Amount of Each Receipt this Period

500.00

**SUBTOTAL** of Receipts This Page (optional).....

**TOTAL** This Period (last page this line number only).....

2000.00

**SCHEDULE A (FEC Form 3)**  
**ITEMIZED RECEIPTS**

 Use separate schedule(s)  
 for each category of the  
 Detailed Summary Page

FOR LINE NUMBER:

PAGE 15 OF 36

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
12	13a	13b	14	

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**PAUL GOSAR FOR CONGRESS**

Full Name (Last, First, Middle Initial)

**Dr. Bryan J. Shanahan**

Mailing Address 1120 N. Conifer

City

Flagstaff

State

AZ

Zip Code

86001

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Shanahan Dental

Occupation

Dentist

Receipt For: 2014

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
01		11		2014

Transaction ID : SA11AI.17825

Amount of Each Receipt this Period

250.00

Full Name (Last, First, Middle Initial)

**Lois Marie Smith**

Mailing Address P.O. Box 1950

City

Prescott

State

AZ

Zip Code

86302

FEC ID number of contributing  
federal political committee.

C

Name of Employer

N/A

Occupation

Retired

Receipt For: 2014

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
03		07		2014

Transaction ID : SA11AI.17864

Amount of Each Receipt this Period

500.00

Full Name (Last, First, Middle Initial)

**Russell Smolden**

Mailing Address 357 E Monte Vista

City

Phoenix

State

AZ

Zip Code

85004

FEC ID number of contributing  
federal political committee.

C

Name of Employer

B3 Strategies

Occupation

CEO

Receipt For: 2014

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

1250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
02		27		2014

Transaction ID : SA11AI.17806

Amount of Each Receipt this Period

750.00

SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

1500.00

# **SCHEDULE A (FEC Form 3)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:

PAGE 16 OF 36

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
12	13a	13b	14	

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

PAUL GOSAR FOR CONGRESS

Full Name (Last, First, Middle Initial)

Howard Sorenson

A.

Mailing Address 2648 S 36th Drive

City

Yuma

State

AZ

Zip Code

85364

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Yuma Endodontics

Occupation

Dentist

Receipt For: 2014

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
03		24		2014

Transaction ID : SA11AI.17863

Amount of Each Receipt this Period

500.00

Full Name (Last, First, Middle Initial)

Dr. Carol Summerhays

B.

Mailing Address 6635 Flanders Drive Suite E

City

San Diego

State

CA

Zip Code

92121

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Summerhays Dental

Occupation

Dentist

Receipt For: 2014

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

750.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
01		11		2014

Transaction ID : SA11AI.17820

Amount of Each Receipt this Period

250.00

Full Name (Last, First, Middle Initial)

Mark A. Tromblay

C.

Mailing Address 1929 Summit Terrace

City

Alexandria

State

VA

Zip Code

22307

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Self

Occupation

Dentist

Receipt For: 2014

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
01		22		2014

Transaction ID : SA11AI.17839

Amount of Each Receipt this Period

250.00

SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

1000.00



# **SCHEDULE A (FEC Form 3)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 17 OF 36

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 11d  
12 13a 13b 14 15

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**PAUL GOSAR FOR CONGRESS**

Full Name (Last, First, Middle Initial)

**Steve Trussell**

Mailing Address 271 S Yale Ct.

City

Gilbert

State

AZ

Zip Code

85296

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Arizona Rock Products Associat

Occupation

Director

Receipt For: 2014

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

500.00

Date of Receipt

M M / D D / Y Y Y Y  
03 31 2014

Transaction ID : SA11AI.17860

Amount of Each Receipt this Period

500.00

Full Name (Last, First, Middle Initial)

**Steven J. Twist**

Mailing Address 13870 N. 98th Place

City

Scottsdale

State

AZ

Zip Code

85260

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Services Group of America

Occupation

Lawyer

Receipt For: 2014

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

700.00

Date of Receipt

M M / D D / Y Y Y Y  
03 31 2014

Transaction ID : SA11AI.17869

Amount of Each Receipt this Period

700.00

Full Name (Last, First, Middle Initial)

**C.** Mailing Address

City

State

Zip Code

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

Date of Receipt

M M / D D / Y Y Y Y

Amount of Each Receipt this Period

**SUBTOTAL** of Receipts This Page (optional).....

**TOTAL** This Period (last page this line number only).....

1200.00

16750.00

# **SCHEDULE A (FEC Form 3)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 18 OF 36

<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input checked="" type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
12	13a	13b	14	

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)  
**PAUL GOSAR FOR CONGRESS**

**A.** Full Name (Last, First, Middle Initial)  
**AMERICAN ASSOCIATION OF ORTHODONTISTS POLITICAL ACTION COMMITTEE**

Mailing Address 401 N. Lindbergh Blvd

City	State	Zip Code
St. Louis	MO	63141

FEC ID number of contributing federal political committee.

**C** C00293910

Name of Employer

Occupation

Receipt For: 2014

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

5000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
01		21		2014

Transaction ID : SA11C.17773

Amount of Each Receipt this Period

5000.00

**B.** Full Name (Last, First, Middle Initial)  
**BUILD PAC**

Mailing Address 1201 15th Street NW

City	State	Zip Code
Washington	DC	20005

FEC ID number of contributing federal political committee.

**C** C00000901

Name of Employer

Occupation

Receipt For: 2014

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

1000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
01		21		2014

Transaction ID : SA11C.17777

Amount of Each Receipt this Period

1000.00

**C.** Full Name (Last, First, Middle Initial)  
**BUILD PAC**

Mailing Address 1201 15th Street NW

City	State	Zip Code
Washington	DC	20005

FEC ID number of contributing federal political committee.

**C** C00000901

Name of Employer

Occupation

Receipt For: 2014

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

2000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
03		31		2014

Transaction ID : SA11C.17704

Amount of Each Receipt this Period

1000.00

**SUBTOTAL** of Receipts This Page (optional).....

**TOTAL** This Period (last page this line number only).....

7000.00

# **SCHEDULE A (FEC Form 3)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 19 OF 36

<input type="checkbox"/> 11a 12	<input type="checkbox"/> 11b 13a	<input checked="" type="checkbox"/> 11c 13b	<input type="checkbox"/> 11d 14	<input type="checkbox"/> 15
------------------------------------	-------------------------------------	--	------------------------------------	-----------------------------

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**PAUL GOSAR FOR CONGRESS**

Full Name (Last, First, Middle Initial)

**DEVON ENERGY CORPORATION POLITICAL ACTION COMMITTEE (DEC PAC)**

**A.**

Mailing Address 333 WEST SHERIDAN

City

OKLAHOMA CITY

State

OK

Zip Code

73102

FEC ID number of contributing  
federal political committee.

**C** C00354753

Name of Employer

Occupation

Receipt For: 2014

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

1000.00

Date of Receipt

M M / D D / Y Y Y Y  
01 / 16 / 2014

**Transaction ID : SA11C.17778**

Amount of Each Receipt this Period

1000.00

Full Name (Last, First, Middle Initial)

**FREEPORT-MCMORAN COPPER & GOLD INC. CITIZENSHIP COMMITTEE**

**B.**

Mailing Address 1 NORTH CENTRAL AVENUE

City

PHOENIX

State

AZ

Zip Code

85004

FEC ID number of contributing  
federal political committee.

**C** C00320101

Name of Employer

Occupation

Receipt For: 2014

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

5000.00

Date of Receipt

M M / D D / Y Y Y Y  
03 / 24 / 2014

**Transaction ID : SA11C.17703**

Amount of Each Receipt this Period

2500.00

Full Name (Last, First, Middle Initial)

**FREEPORT-MCMORAN COPPER & GOLD INC. CITIZENSHIP COMMITTEE**

**C.**

Mailing Address 1 NORTH CENTRAL AVENUE

City

PHOENIX

State

AZ

Zip Code

85004

FEC ID number of contributing  
federal political committee.

**C** C00320101

Name of Employer

Occupation

Receipt For: 2014

☐ Primary ☒ General  
☐ Other (specify)

Election Cycle-to-Date

7500.00

Date of Receipt

M M / D D / Y Y Y Y  
03 / 27 / 2014

**Transaction ID : SA11C.17705**

Amount of Each Receipt this Period

2500.00

**SUBTOTAL** of Receipts This Page (optional).....

6000.00

**TOTAL** This Period (last page this line number only).....

**SCHEDULE A (FEC Form 3)**  
**ITEMIZED RECEIPTS**

 Use separate schedule(s)  
 for each category of the  
 Detailed Summary Page

 FOR LINE NUMBER:  
 (check only one)

PAGE 20 OF 36

<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input checked="" type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
12	13a	13b	14	

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

 NAME OF COMMITTEE (In Full)  
**PAUL GOSAR FOR CONGRESS**

<b>A.</b> Full Name (Last, First, Middle Initial) <b>HALLIBURTON COMPANY PAC</b>		Date of Receipt <table border="1"> <tr> <td>M M M</td> <td>/</td> <td>D D D</td> <td>/</td> <td>Y Y Y Y Y</td> </tr> <tr> <td>03</td> <td></td> <td>07</td> <td></td> <td>2014</td> </tr> </table>		M M M	/	D D D	/	Y Y Y Y Y	03		07		2014
M M M	/	D D D	/	Y Y Y Y Y									
03		07		2014									
Mailing Address 801 17TH ST NW 10TH FLOOR		<b>Transaction ID : SA11C.17698</b>											
City WASHINGTON	State DC	Zip Code 20006											
FEC ID number of contributing federal political committee. <b>C</b> C00035691		Amount of Each Receipt this Period 1000.00											
Name of Employer Occupation													
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		Election Cycle-to-Date 1000.00											
<b>B.</b> Full Name (Last, First, Middle Initial) <b>IPAA WILDCATTERS FUND</b>		Date of Receipt <table border="1"> <tr> <td>M M M</td> <td>/</td> <td>D D D</td> <td>/</td> <td>Y Y Y Y Y</td> </tr> <tr> <td>02</td> <td></td> <td>18</td> <td></td> <td>2014</td> </tr> </table>		M M M	/	D D D	/	Y Y Y Y Y	02		18		2014
M M M	/	D D D	/	Y Y Y Y Y									
02		18		2014									
Mailing Address 1201 15TH STREET, NW SUITE 300		<b>Transaction ID : SA11C.17768</b>											
City WASHINGTON	State DC	Zip Code 20005											
FEC ID number of contributing federal political committee. <b>C</b> C00246306		Amount of Each Receipt this Period 2000.00											
Name of Employer Occupation													
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		Election Cycle-to-Date 2000.00											
<b>C.</b> Full Name (Last, First, Middle Initial) <b>NATIONAL OCEAN INDUSTRIES ASSOCIATION (NOIA) POLITICAL ACTIO</b>		Date of Receipt <table border="1"> <tr> <td>M M M</td> <td>/</td> <td>D D D</td> <td>/</td> <td>Y Y Y Y Y</td> </tr> <tr> <td>03</td> <td></td> <td>07</td> <td></td> <td>2014</td> </tr> </table>		M M M	/	D D D	/	Y Y Y Y Y	03		07		2014
M M M	/	D D D	/	Y Y Y Y Y									
03		07		2014									
Mailing Address 1120 G STREET NW SUITE 900		<b>Transaction ID : SA11C.17702</b>											
City WASHINGTON	State DC	Zip Code 20005											
FEC ID number of contributing federal political committee. <b>C</b> C00409565		Amount of Each Receipt this Period 1000.00											
Name of Employer Occupation													
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		Election Cycle-to-Date 1000.00											
<b>SUBTOTAL</b> of Receipts This Page (optional).....		4000.00											
<b>TOTAL</b> This Period (last page this line number only).....													

# **SCHEDULE A (FEC Form 3)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 21 OF 36

<input type="checkbox"/> 11a 12	<input type="checkbox"/> 11b 13a	<input checked="" type="checkbox"/> 11c 13b	<input type="checkbox"/> 11d 14	<input type="checkbox"/> 15
------------------------------------	-------------------------------------	--	------------------------------------	-----------------------------

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**PAUL GOSAR FOR CONGRESS**

Full Name (Last, First, Middle Initial)

**NATIONAL RESTAURANT ASSOCIATION PAC**

**A.**

Mailing Address 1200 17th Street NW

City

Washington

State

DC

Zip Code

20036

FEC ID number of contributing  
federal political committee.

**C** C00003764

Name of Employer

Occupation

Receipt For: 2014

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

2500.00

Date of Receipt

M M / D D / Y Y Y Y  
01 / 14 / 2014

**Transaction ID : SA11C.17779**

Amount of Each Receipt this Period

2500.00

Full Name (Last, First, Middle Initial)

**OCCIDENTAL PETROLEUM CORPORATION POLITICAL ACTION COMMITTEE**

**B.**

Mailing Address 10889 WILSHIRE BLVD.

City

LOS ANGELES

State

CA

Zip Code

90024

FEC ID number of contributing  
federal political committee.

**C** C00083857

Name of Employer

Occupation

Receipt For: 2014

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

1000.00

Date of Receipt

M M / D D / Y Y Y Y  
02 / 18 / 2014

**Transaction ID : SA11C.17769**

Amount of Each Receipt this Period

1000.00

Full Name (Last, First, Middle Initial)

**WESTERN ENERGY ALLIANCE PAC**

**C.**

Mailing Address 410 17TH STREET SUITE 700

City

DENVER

State

CO

Zip Code

80202

FEC ID number of contributing  
federal political committee.

**C** C00426569

Name of Employer

Occupation

Receipt For: 2014

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

1000.00

Date of Receipt

M M / D D / Y Y Y Y  
03 / 05 / 2014

**Transaction ID : SA11C.17701**

Amount of Each Receipt this Period

1000.00

**SUBTOTAL** of Receipts This Page (optional).....

4500.00

**TOTAL** This Period (last page this line number only).....

# **SCHEDULE A (FEC Form 3)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 22 OF 36

<input type="checkbox"/> 11a 12	<input type="checkbox"/> 11b 13a	<input checked="" type="checkbox"/> 11c 13b	<input type="checkbox"/> 11d 14	<input type="checkbox"/> 15
------------------------------------	-------------------------------------	--	------------------------------------	-----------------------------

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)  
**PAUL GOSAR FOR CONGRESS**

Full Name (Last, First, Middle Initial)

**WPX ENERGY, INC. POLITICAL ACTION COMMITTEE**

Mailing Address 801 PENNSYLVANIA AVE. NW  
 SUITE 315

City State Zip Code  
 WASHINGTON DC 20004

FEC ID number of contributing  
federal political committee.

**C** C00502518

Name of Employer

Occupation

Receipt For: 2014

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

1000.00

Date of Receipt

M M / D D / Y Y Y Y  
 01 27 2014

Transaction ID : SA11C.17775

Amount of Each Receipt this Period

1000.00

Full Name (Last, First, Middle Initial)

**B.**  
 Mailing Address

City State Zip Code

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

Date of Receipt

M M / D D / Y Y Y Y

Amount of Each Receipt this Period

Full Name (Last, First, Middle Initial)

**C.**  
 Mailing Address

City State Zip Code

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

Date of Receipt

M M / D D / Y Y Y Y

Amount of Each Receipt this Period

**SUBTOTAL** of Receipts This Page (optional).....

**TOTAL** This Period (last page this line number only).....

1000.00

22500.00

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 23 OF 36

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**PAUL GOSAR FOR CONGRESS**

Full Name (Last, First, Middle Initial)

**A. Authorize.net Corp.**

Mailing Address 915 South 500 East, Suite 200

City	State	Zip Code
American Fork	UT	84003

Purpose of Disbursement  
Credit Card Merchant Fees

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

Disbursement For: 2014

☒ Primary ☐ General  
☐ Other (specify)

State: District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
01		03		2014

Amount of Each Disbursement this Period

27.95
-------

Transaction ID : SB17.17750

**B. Authorize.net Corp.**

Mailing Address 915 South 500 East, Suite 200

City	State	Zip Code
American Fork	UT	84003

Purpose of Disbursement  
Credit Card Merchant Fees

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

Disbursement For: 2014

☒ Primary ☐ General  
☐ Other (specify)

State: District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
02		03		2014

Amount of Each Disbursement this Period

27.95
-------

Transaction ID : SB17.17753

**C. Authorize.net Corp.**

Mailing Address 915 South 500 East, Suite 200

City	State	Zip Code
American Fork	UT	84003

Purpose of Disbursement  
Credit Card Merchant Fees

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

Disbursement For: 2014

☒ Primary ☐ General  
☐ Other (specify)

State: District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
03		04		2014

Amount of Each Disbursement this Period

27.95
-------

Transaction ID : SB17.17757

**SUBTOTAL** of Disbursements This Page (optional).....**TOTAL** This Period (last page this line number only).....

83.85

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 24 OF 36

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**PAUL GOSAR FOR CONGRESS**

Full Name (Last, First, Middle Initial)

**A. Capitol Hill Club**

Mailing Address 300 1st St SE

City	State	Zip Code
Washington	DC	20003

Purpose of Disbursement  
Meals

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

Disbursement For: 2014

☒ Primary ☐ General  
☐ Other (specify)

State: District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
01		24		2014

Amount of Each Disbursement this Period

107.42
--------

Transaction ID : SB17.17712

**B. Capitol Hill Club**

Mailing Address 300 1st St SE

City	State	Zip Code
Washington	DC	20003

Purpose of Disbursement  
Meals and Fundraising Events

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

Disbursement For: 2014

☒ Primary ☐ General  
☐ Other (specify)

State: District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
02		20		2014

Amount of Each Disbursement this Period

833.28
--------

Transaction ID : SB17.17720

**c. Capitol Hill Club**

Mailing Address 300 1st St SE

City	State	Zip Code
Washington	DC	20003

Purpose of Disbursement

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

Disbursement For: 2014

☒ Primary ☐ General  
☐ Other (specify)

State: District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
03		21		2014

Amount of Each Disbursement this Period

100.60
--------

Transaction ID : SB17.17723

**SUBTOTAL** of Disbursements This Page (optional).....**TOTAL** This Period (last page this line number only).....

1041.30



# **SCHEDULE B (FEC Form 3)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 25 OF 36

☒ 17 ☐ 18 ☐ 19a ☐ 19b  
☐ 20a ☐ 20b ☐ 20c ☐ 21

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**PAUL GOSAR FOR CONGRESS**

Full Name (Last, First, Middle Initial)

## **A. Delta Airlines**

Mailing Address 1030 Delta Boulevard

City State Zip Code  
 Atlanta GA 30320

Purpose of Disbursement  
 Airfare

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For: 2014

☒ Primary ☐ General  
☐ Other (specify)

State:

District:

Date of Disbursement

M M / D D / Y Y Y Y  
 03 / 14 / 2014

Amount of Each Disbursement this Period

295.00

Transaction ID : SB17.17764

Category/  
Type

## **B. DreamHost.com**

Mailing Address 417 Associated Dr  
 PMB #257

City State Zip Code  
 Brea CA 92821

Purpose of Disbursement  
 Web Hosting

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For: 2014

☒ Primary ☐ General  
☐ Other (specify)

State:

District:

Date of Disbursement

M M / D D / Y Y Y Y  
 02 / 10 / 2014

Amount of Each Disbursement this Period

119.40

Transaction ID : SB17.17737

Category/  
Type

## **c. Facebook**

Mailing Address 1 Hacker Way

City State Zip Code  
 Menlo Park CA 94025

Purpose of Disbursement  
 Online Advertising

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For: 2014

☒ Primary ☐ General  
☐ Other (specify)

State:

District:

Date of Disbursement

M M / D D / Y Y Y Y  
 02 / 18 / 2014

Amount of Each Disbursement this Period

50.27

Transaction ID : SB17.17706

Category/  
Type

**SUBTOTAL** of Disbursements This Page (optional).....

**TOTAL** This Period (last page this line number only).....

464.67

# **SCHEDULE B (FEC Form 3)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 26 OF 36

☒ 17    ☐ 18    ☐ 19a    ☐ 19b  
☐ 20a    ☐ 20b    ☐ 20c    ☐ 21

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**PAUL GOSAR FOR CONGRESS**

Full Name (Last, First, Middle Initial)

## **A. Global Payments**

Mailing Address 10 Glenlake Pakrway

City State Zip Code  
 Atlanta GA 30328

Purpose of Disbursement  
 Credit Card Merchant Fees

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For: 2014

☒ Primary ☐ General  
☐ Other (specify)

State:

District:

Date of Disbursement

M M / D D / Y Y Y Y  
 01 / 02 / 2014

Amount of Each Disbursement this Period

112.10

Transaction ID : SB17.17749

## **B. Global Payments**

Mailing Address 10 Glenlake Pakrway

City State Zip Code  
 Atlanta GA 30328

Purpose of Disbursement  
 Credit Card Merchant Fees

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For: 2014

☒ Primary ☐ General  
☐ Other (specify)

State:

District:

Date of Disbursement

M M / D D / Y Y Y Y  
 02 / 05 / 2014

Amount of Each Disbursement this Period

26.02

Transaction ID : SB17.17754

## **c. Global Payments**

Mailing Address 10 Glenlake Pakrway

City State Zip Code  
 Atlanta GA 30328

Purpose of Disbursement  
 Credit Card Merchant Fees

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For: 2014

☒ Primary ☐ General  
☐ Other (specify)

State:

District:

Date of Disbursement

M M / D D / Y Y Y Y  
 03 / 03 / 2014

Amount of Each Disbursement this Period

53.96

Transaction ID : SB17.17756

**SUBTOTAL** of Disbursements This Page (optional).....

**TOTAL** This Period (last page this line number only).....

192.08

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 27 OF 36

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**PAUL GOSAR FOR CONGRESS**

Full Name (Last, First, Middle Initial)

**A. Hieu Tran & Company**

Mailing Address PO Box 11494

Date of Disbursement

M M	/	D D	/	Y Y Y Y
03		31		2014

City	State	Zip Code
Tempe	AZ	85284

Amount of Each Disbursement this Period

1250.00
---------

Purpose of Disbursement  
Accounting and Compliance

Candidate Name

Category/  
Type**Transaction ID : SB17.17746**

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For: 2014

☒ Primary ☐ General  
☐ Other (specify)

State:

District:

Full Name (Last, First, Middle Initial)

**B. iContact**Mailing Address 2450 Perimeter Park Drive  
#105

Date of Disbursement

M M	/	D D	/	Y Y Y Y
01		03		2014

City	State	Zip Code
Morrisville	NC	27560

Amount of Each Disbursement this Period

80.25
-------

Purpose of Disbursement  
Email Service

Candidate Name

Category/  
Type**Transaction ID : SB17.17724**

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For: 2014

☒ Primary ☐ General  
☐ Other (specify)

State:

District:

Full Name (Last, First, Middle Initial)

**C. iContact**Mailing Address 2450 Perimeter Park Drive  
#105

Date of Disbursement

M M	/	D D	/	Y Y Y Y
02		03		2014

City	State	Zip Code
Morrisville	NC	27560

Amount of Each Disbursement this Period

80.25
-------

Purpose of Disbursement  
Email Service

Candidate Name

Category/  
Type**Transaction ID : SB17.17725**

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For: 2014

☒ Primary ☐ General  
☐ Other (specify)

State:

District:

**SUBTOTAL** of Disbursements This Page (optional).....**TOTAL** This Period (last page this line number only).....

1410.50

# **SCHEDULE B (FEC Form 3)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 28 OF 36

☒ 17 ☐ 18 ☐ 19a ☐ 19b  
☐ 20a ☐ 20b ☐ 20c ☐ 21

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**PAUL GOSAR FOR CONGRESS**

Full Name (Last, First, Middle Initial)

## **A. iContact**

Mailing Address 2450 Perimeter Park Drive  
#105

City Morrisville State NC Zip Code 27560

Purpose of Disbursement  
Email service

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2014  
☒ Primary ☐ General  
☐ Other (specify)

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
03 / 04 / 2014

Amount of Each Disbursement this Period

80.25

Transaction ID : SB17.17726

## **B. Lovas Co.**

Mailing Address 6740 W Deer Valley Red  
Ste D107-205

City Glendale State AZ Zip Code 85310

Purpose of Disbursement  
Fundraising Fees

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2014  
☒ Primary ☐ General  
☐ Other (specify)

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
01 / 15 / 2014

Amount of Each Disbursement this Period

5500.00

Transaction ID : SB17.17747

## **c. Lovas Co.**

Mailing Address 6740 W Deer Valley Red  
Ste D107-205

City Glendale State AZ Zip Code 85310

Purpose of Disbursement  
Fundraising Fees

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2014  
☒ Primary ☐ General  
☐ Other (specify)

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
02 / 14 / 2014

Amount of Each Disbursement this Period

5500.00

Transaction ID : SB17.17748

**SUBTOTAL** of Disbursements This Page (optional).....

**TOTAL** This Period (last page this line number only).....

11080.25

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 29 OF 36

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**PAUL GOSAR FOR CONGRESS**

Full Name (Last, First, Middle Initial)

**A. Piryx**

Mailing Address 144 2nd St,

Date of Disbursement

M M	/	D D	/	Y Y Y Y
01		31		2014

City	State	Zip Code
San Francisco	CA	94105

Purpose of Disbursement  
Credit Card Merchant Fees

Amount of Each Disbursement this Period

9.00
------

Transaction ID : SB17.17752

Candidate Name

Category/  
Type

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For: 2014

<input checked="" type="checkbox"/> Primary	<input type="checkbox"/> General
<input type="checkbox"/> Other (specify)	

State:

District:

Full Name (Last, First, Middle Initial)

**B. Piryx**

Mailing Address 144 2nd St,

Date of Disbursement

M M	/	D D	/	Y Y Y Y
02		28		2014

City	State	Zip Code
San Francisco	CA	94105

Purpose of Disbursement  
Credit Card Merchant Fees

Amount of Each Disbursement this Period

11.25
-------

Transaction ID : SB17.17755

Candidate Name

Category/  
Type

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For: 2014

<input checked="" type="checkbox"/> Primary	<input type="checkbox"/> General
<input type="checkbox"/> Other (specify)	

State:

District:

Full Name (Last, First, Middle Initial)

**C. Piryx**

Mailing Address 144 2nd St,

Date of Disbursement

M M	/	D D	/	Y Y Y Y
03		06		2014

City	State	Zip Code
San Francisco	CA	94105

Purpose of Disbursement  
Credit Card Merchant Fees

Amount of Each Disbursement this Period

9.00
------

Transaction ID : SB17.17759

Candidate Name

Category/  
Type

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For: 2014

<input checked="" type="checkbox"/> Primary	<input type="checkbox"/> General
<input type="checkbox"/> Other (specify)	

State:

District:

**SUBTOTAL** of Disbursements This Page (optional).....**TOTAL** This Period (last page this line number only).....

29.25

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 30 OF 36

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**PAUL GOSAR FOR CONGRESS**

Full Name (Last, First, Middle Initial)

**A. Postmaster**

Mailing Address 475 L'Enfant Plaza, SW

Date of Disbursement

M M	/	D D	/	Y Y Y Y
01		15		2014

City	State	Zip Code
Washington	DC	20260

Purpose of Disbursement  
PO Box Renewal

Amount of Each Disbursement this Period

96.00
-------

Transaction ID : SB17.17760

Candidate Name

Category/  
Type

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For: 2014

<input checked="" type="checkbox"/> Primary	<input type="checkbox"/> General
<input type="checkbox"/> Other (specify)	

State:

District:

Full Name (Last, First, Middle Initial)

**B. Salt River Fields**

Mailing Address 7555 N Pima Rd.

Date of Disbursement

M M	/	D D	/	Y Y Y Y
02		20		2014

City	State	Zip Code
Scottsdale	AZ	85258

Purpose of Disbursement  
Fundraising Event - Suite Rental

Amount of Each Disbursement this Period

1090.00
---------

Transaction ID : SB17.17738

Candidate Name

Category/  
Type

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For: 2014

<input checked="" type="checkbox"/> Primary	<input type="checkbox"/> General
<input type="checkbox"/> Other (specify)	

State:

District:

Full Name (Last, First, Middle Initial)

**c. Salt River Fields**

Mailing Address 7555 N Pima Rd.

Date of Disbursement

M M	/	D D	/	Y Y Y Y
03		10		2014

City	State	Zip Code
Scottsdale	AZ	85258

Purpose of Disbursement  
Fundraising Event - Suite Rental and Catering

Amount of Each Disbursement this Period

795.00
--------

Transaction ID : SB17.17740

Candidate Name

Category/  
Type

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For: 2014

<input checked="" type="checkbox"/> Primary	<input type="checkbox"/> General
<input type="checkbox"/> Other (specify)	

State:

District:

**SUBTOTAL** of Disbursements This Page (optional).....**TOTAL** This Period (last page this line number only).....

1981.00

**SCHEDULE B (FEC Form 3)**  
**ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 31 OF 36

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**PAUL GOSAR FOR CONGRESS**

Full Name (Last, First, Middle Initial)

**A. Square**

Mailing Address 901 Mission Street

City	State	Zip Code
San Francisco	CA	94103

Purpose of Disbursement  
Credit Card Merchant Fees

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For: 2014

☒ Primary ☐ General  
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
01		11		2014

Amount of Each Disbursement this Period

619.66
--------

Transaction ID : SB17.17751

**B. The Standard**

Mailing Address 130 S Main St.

City	State	Zip Code
Yuma	AZ	85364

Purpose of Disbursement  
Fundraising Event

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For: 2014

☒ Primary ☐ General  
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
01		27		2014

Amount of Each Disbursement this Period

267.08
--------

Transaction ID : SB17.17715

**c. US Airways**

Mailing Address 4000 E. Sky Harbor Blvd.

City	State	Zip Code
Phoenix	AZ	85034

Purpose of Disbursement  
Airfare

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For: 2014

☒ Primary ☐ General  
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
03		14		2014

Amount of Each Disbursement this Period

236.50
--------

Transaction ID : SB17.17765

**SUBTOTAL** of Disbursements This Page (optional).....**TOTAL** This Period (last page this line number only).....

1123.24





**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 33 OF 36

<input type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input checked="" type="checkbox"/> 21

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**PAUL GOSAR FOR CONGRESS**

Full Name (Last, First, Middle Initial)

**A. JUSTIN AMASH FOR CONGRESS**

Mailing Address 1500 E BELTLINE AVE SE STE 250

City	State	Zip Code
GRAND RAPIDS	MI	49506

Purpose of Disbursement  
Contribution

011

Candidate Name

Office Sought:	<input checked="" type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

Disbursement For: 2014
<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General
<input type="checkbox"/> Other (specify)

State: MI District: 03

Date of Disbursement

M M	/	D D	/	Y Y Y Y
01		01		2014

Amount of Each Disbursement this Period

2000.00
---------

Transaction ID : SB21.17727

**B. MILLER-MEEKS FOR CONGRESS**

Mailing Address 11674-90TH ST

City	State	Zip Code
OTTUMWA	IA	52501

Purpose of Disbursement  
Campaign Contribution

011

Candidate Name

Office Sought:	<input checked="" type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

Disbursement For: 2014
<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General
<input type="checkbox"/> Other (specify)

State: IA District: 02

Date of Disbursement

M M	/	D D	/	Y Y Y Y
03		31		2014

Amount of Each Disbursement this Period

2000.00
---------

Transaction ID : SB21.17732

**C.**

Mailing Address

City	State	Zip Code

Purpose of Disbursement

Category/ Type
-------------------

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

Disbursement For:
<input type="checkbox"/> Primary <input type="checkbox"/> General
<input type="checkbox"/> Other (specify)

State: District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y

Amount of Each Disbursement this Period

--

**SUBTOTAL** of Disbursements This Page (optional).....**TOTAL** This Period (last page this line number only).....

4000.00

4000.00

**SCHEDULE D (FEC Form 3)****DEBTS AND OBLIGATIONS****Excluding Loans**(Use separate  
schedule(s)  
for each  
numbered line)

PAGE 34 OF 36

FOR LINE NUMBER:  
(check only one)☐ 9  
☒ 10

NAME OF COMMITTEE (In Full)

**PAUL GOSAR FOR CONGRESS**

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor

**Hammond & Associates**

Nature of Debt (Purpose):

Fundraising Services

Mailing Address P.O. Box 368

City State

Zip Code

Falls Church

VA

22040

Outstanding Balance Beginning This Period

7500.00

Transaction ID : SD10.11368

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

7500.00

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor

**Integrated Web Strategy**

Nature of Debt (Purpose):

Ad Purchase

Mailing Address 5330 N 12th St.

City State

Zip Code

Phoenix

AZ

85012

Outstanding Balance Beginning This Period

110.00

Transaction ID : SD10.14600

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

110.00

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor

**Integrated Web Strategy**

Nature of Debt (Purpose):

Video Production

Mailing Address 5330 N 12th St.

City

State

Zip Code

Phoenix

AZ

85012

Outstanding Balance Beginning This Period

850.00

Transaction ID : SD10.14601

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

850.00

1) **SUBTOTALS** This Period This Page (optional) ..... ►

8460.00

2) **TOTALS** This Period (last page this line number only) ..... ►3) **TOTAL OUTSTANDING LOANS** from Schedule C (last page only)..... ►

0.00

4) **ADD 2) and 3)** and carry forward to appropriate line of Summary Page (last page only) ►

0.00

**SCHEDULE D (FEC Form 3)****DEBTS AND OBLIGATIONS****Excluding Loans**(Use separate  
schedule(s)  
for each  
numbered line)

PAGE 35 OF 36

FOR LINE NUMBER:  
(check only one)☐ 9  
☒ 10

NAME OF COMMITTEE (In Full)

**PAUL GOSAR FOR CONGRESS**

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor

**Integrated Web Strategy**

Nature of Debt (Purpose):

Email Sends and Facebook Ads

Mailing Address 5330 N 12th St.

City State

Zip Code

Phoenix

AZ

85012

Outstanding Balance Beginning This Period

4645.21

Transaction ID : SD10.14602

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

1078.16

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor

**Integrated Web Strategy**

Nature of Debt (Purpose):

Video Production

Mailing Address 5330 N 12th St.

City State

Zip Code

Phoenix

AZ

85012

Outstanding Balance Beginning This Period

1600.00

Transaction ID : SD10.14603

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

1600.00

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor

Nature of Debt (Purpose):

Mailing Address

City

State

Zip Code

Outstanding Balance Beginning This Period

Amount Incurred This Period

Payment This Period

Outstanding Balance at Close of This Period

1) **SUBTOTALS** This Period This Page (optional) ..... ▶

2678.16

2) **TOTALS** This Period (last page this line number only) ..... ▶

11138.16

3) **TOTAL OUTSTANDING LOANS** from Schedule C (last page only)..... ▶

0.00

4) **ADD 2) and 3)** and carry forward to appropriate line of Summary Page (last page only) ▶

11138.16

: 97 `A=G79 @G B9CI G`H9LH`F9 @5 H98 `HC`5 `F9DCFHŽG7 <98I @ `CF`+9A=N5HCB  
.

Form/Schedule: SD10  
Transaction ID : SD10.14602

This bill was disputed by the Committee and has been resolved as settled.

Form/Schedule:  
Transaction ID: